

<p>To the right is information which shows your total wages by W-2 box and the amount of any deferred compensation and/or other pretax deductions that were subtracted from total wages to arrive at your W-2 wages.</p> <p>General instructions for these forms, including an explanation of the letter codes used in box 12, are available on a separate document.</p>	Gross Wages	130666.72	130666.72	130666.72
	Txbl Benefits			
	Group Term Life Adoption	96.80	96.80	96.80
	Deferred Comp Section 125	(3974.64)	(3974.64)	(3974.64)
	Other Pretax/Wage Limit			
	W-2 Wages	126788.88	126788.88	126788.88

a Employee's social security number XXX-XX-5729		b Employer identification number (EIN) 20-3469219		d Control number 000538067501		OMB No. 1545-0008	
c Employer's name, address, and ZIP code INFOR (US), LLC 13560 Morris Road Suite 4100 Alpharetta GA 30004				1 Wages, tips, other compensation 126788.88		2 Federal income tax withheld 20482.00	
				3 Social security wages 126788.88		4 Social security tax withheld 7860.91	
				5 Medicare wages and tips 126788.88		6 Medicare tax withheld 1838.44	
				7 Social security tips		8 Allocated tips	
e Employee's first name and initial David J 4510 Ambassador way Cumming GA 30040 USA				Last name Jayaraj		Suff.	
f Employee's address and ZIP code				9		10 Dependent care benefits	
15 State Employer's state ID Number GA 3073982-OP				16 State wages, tips, etc. 126788.88		17 State income tax 6801.76	
18 Local wages, tips, etc.				19 Local income tax		20 Locality name	
13 Statutory Retirement Third-party employee plan sick Pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				12b Code W 2420.00		12c Code DD 20940.00	
14 Other				12d Code			

Form W-2 Wage and Tax Statement
Copy C—For EMPLOYEE'S RECORDS

2023

Department of the Treasury—Internal Revenue Service

This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.

a Employee's social security number XXX-XX-5729		b Employer identification number (EIN) 20-3469219		d Control number 000538067501		OMB No. 1545-0008	
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13 Statutory Retirement Third-party employee plan sick Pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				12b Code W 2420.00		12c Code DD 20940.00	
14 Other				12d Code			

Form W-2 Wage and Tax Statement
Copy B—To Be Filed With Employee's FEDERAL Tax Return.

2023

Department of the Treasury - Internal Revenue Service

a Employee's social security number XXX-XX-5729		b Employer identification number (EIN) 20-3469219		d Control number 000538067501		OMB No. 1545-0008	
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18 Local wages, tips, etc.				19 Local income tax		20 Locality name	
13 Statutory Retirement Third-party employee plan sick Pay <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>				12b Code W 2420.00		12c Code DD 20940.00	
14 Other				12d Code			

Form W-2 Wage and Tax Statement
Copy 2—To Be Filed With Employee's State, City, or Local Income Tax Return

2023

Department of the Treasury - Internal Revenue Service

